

IN THE UNITED STATES DISTRICT COURT FOR THE  
WESTERN DISTRICT OF TENNESSEE  
~~WESTERN~~ DIVISION  
Eastern

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CLERK OF DISTRICT COURT  
WESTERN DISTRICT OF TENNESSEE

ABRAHAM MEDINA

(Enter above the full name of the plaintiff  
or plaintiffs in this action.)

vs.

MADISON COUNTY JAIL

(Enter above the full name of the defendant  
or defendants in this action.)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS UNDER 42 U.S.C., §1983

I. Previous Lawsuits

- A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? Yes ( ) No ☒
- B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

1. Parties to this previous lawsuit

Plaintiffs: \_\_\_\_\_

Defendants: \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county): \_\_\_\_\_

3. Docket Number: \_\_\_\_\_

4. Name of judge to whom case was assigned: \_\_\_\_\_

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?) \_\_\_\_\_

6. Approximate date of filing lawsuit: \_\_\_\_\_

7. Approximate date of disposition: \_\_\_\_\_

## II. Place of Present Confinement: \_\_\_\_\_

A. Is there a prisoner grievance procedure in the institution?

Yes (X) No ( )

B. Did you present the facts relating to your complaint in the state prisoner grievance procedure?

Yes (X) No ( )

C. If your answer is Yes:

1. What steps did you take? WROTE REQUEST / AGREEMENT FORMS.  
SPOKE TO SERGANTS, LIEUTENANTS
2. What was the result? SAD THERE WAS NOTHING THEY  
COULD DO ABOUT IT

D. If your answer is No, explain why not: \_\_\_\_\_

## III. Parties

(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of Plaintiff ABRAHAM MEDINAAddress (ENCLOSURE) 535 S. LEBERT ST, JACKSON TN. 38301

(In item B below, place the full name of the defendant in the first blank, his official position in the second blank, and his and his place of employment in the third blank. Use Item C for the names, positions, and places of employment of an additional defendants.)

B. Defendant MADISON COUNTY JAIL is employed asat MADISON COUNTY JAIL

C. Additional Defendants: \_\_\_\_\_

## IV. Statement of Claim

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheet if necessary.

I WAS HAVING SEVERE PAIN DUE TO MY TOOTH & SPOKE TO  
DEPUTIES SERGANTS, LIEUTENANTS FOR (2) WEEKS STRAIGHT  
TRYING TO GET MEDICAL HELP FOR MY DENTAL PAIN THEY DID  
NOT WANT TO DO NOTHING, WHEN THEY DID FINALLY TAKE ME TO  
THE DENTIST HE EXPLAINED MY SITUATION OVER AND OVER  
THEY PULLED MY TOOTH OUT WITHOUT MY SAY SO AND WHEN  
THERE WAS NO REASON TO DO SO IN THE END ALL THEY KEPT TELLING  
ME WAS ALL MADISON COUNTY DID WAS PULL & KNEW THE LAW SO I  
SHOWED THEM PIECES OF LAWS AND REGS SAYING THEY HAVE TO GIVE US  
MEDICAL & DENTAL CARE, IN THE END NOTHING WAS DONE THEY JUST STOPPED  
RESPONDING.

V. Relief

State briefly exactly what you want the court to do for you. Make no legal arguments.

Cite no cases or statutes.

I WOULD APPRECIATE IT IF I COULD GET DENTAL COMPENSATION  
FOR MY DENTAL CARE, I WOULD ALSO LIKE COMPENSATION  
FOR MY PAIN AND SUFFERING. AND IF ANYTHING CAN  
BE DONE FOR OTHER INMATES IN THIS SAME FACILITY.  
I WOULD TRULY MORE THAN APPRECIATE THAT!  
PLEASE AND THANK YOU.

VI. Jury Demand

I would like to have my case tried by a jury. Yes ☒ No ☐.

I (We) hereby certify under penalty of perjury that the above complaint is true to the best of our information, knowledge, and belief.

Signed this DEC day of 12, 2013.

ABRAHAM MEDINA

(Signature of Plaintiff/Plaintiffs)